


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000031210</b> 1. Entity Name <b>BRADSHAW ELECTRIC, INC.</b>	
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Principal Place of Business <b>1169 LAMESA AVE. WINTER SPRINGS, FL 32708</b>	Mailing Address <b>1169 LAMESA AVE. WINTER SPRINGS, FL 32708</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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01092008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3503628</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>BRADSHAW, BARBARA J 1169 LAMESA AVE. WINTER SPRINGS, FL 32708</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRADSHAW, BARBARA 1169 LA MESA AVE WINTER SPGS, FL 32708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRADSHAW, FLOYD J 1169 LA MESA AVE WINTER SPGS, FL 32708
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<p>U00000840010 03/06/08-80032-004 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Barbara Bradshaw Barbara Bradshaw 2-18-08 407-699-8456  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #